

**UNITED STATES DISTRICT COURT**

WESTERN DISTRICT OF WASHINGTON

**CV101343**

Case Number:

Michael Wade Broussard

Plaintiff/Petitioner

vs.

President of The United States  
Obama, Barack

Defendant(s)/Respondent(s)

**APPLICATION TO PROCEED  
IN FORMA PAUPERIS,  
SUPPORTING DOCUMENTATION  
AND ORDER**

FILED ENTERED

LODGED RECEIVED

AUG 19 2010 DJ

AT SEATTLE  
CLERK U.S. DISTRICT COURT  
WESTFRN DISTRICT O. WASHINGTON

DEPLW

I, (print your name) **MICHAEL WADE BROUSSARD**

declare I am the plaintiff/petitioner in the above entitled proceeding; that, in support of my request to proceed without being required to prepay fees, costs or give security therefor, I state that because of my poverty, I am unable to pay the costs of said proceeding or give security therefor; that I believe I am entitled to relief. The nature of my action, defense, or other proceeding **I intend to present are briefly stated as follows:**

In support of this application, I answer **all** of the following ques1. Are you presently employed? **No****10-CV-01343-IFP**

Yes If Yes, state the amount of your salary or wages per month, and give the name and address of your employer (list both gross and net salary):

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**X** No

If No, state the date of last employment and the amount of the salary and wages per month which you received:

**2008 - min wage - didn't make enough to file.**

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2. In the past twelve months, have you received any money from any of the following sources?

- a. Business, profession or other self-employment
- b. Rent payments, interest or dividends
- c. Pensions, annuities or life insurance payments
- d. Disability or workers compensation payments
- e. Gifts or inheritances
- f. Any other sources

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If the answer to any of the above is "Yes", describe each source of money and state the amount received from each during the past twelve months:

Business, profession or other self-employment

**SSI - SSA - Around - 7,800 year**

Rent payments, interest or dividends

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Pensions, annuities or life insurance payments

Pensions, annuities or life insurance payments	
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Disability or workers compensation payments

Disability or workers compensation payments	SSI - SSA.
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Gifts or inheritances

Any other sources

Gifts or inheritances	Any other sources
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3. Do you own any cash, or do you have money in checking or savings accounts? *No* Yes If Yes, state the total value of each item (include prison account funds) No4. Do you own or have any interest in any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? *No* Yes If Yes, describe the property and state its approximate value: No5. Are any persons dependent upon you for support? *No* Yes If Yes, state your relationship to those persons, and indicate how much you contribute toward their support: No

I declare under penalty of perjury that the foregoing is true and correct.

Executed on: *08-17-2010**Official Wade Branson*  
Signature of Applicant

**Certification  
(For Prisoner Applicants Only)**

Have the institution fill out the Certification portion of this application and attach a certified copy of your prison trust account statement showing transactions for the past six months.

I certify that the applicant named herein has the sum of \$ \_\_\_\_\_ on account to his/her credit at

(Name of Institution)

(Name of Institution)	
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Dated: \_\_\_\_\_

Signature of Financial Officer \_\_\_\_\_

**Order of Court**

The application is hereby denied.

The application is hereby granted. Let the applicant proceed without prepayment of costs or fees or the necessity of giving security therefor.

United States Judge  
or Magistrate Judge

Date

United States Judge  
or Magistrate Judge

Date

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6 **UNITED STATES DISTRICT COURT FOR THE**  
7 **WESTERN DISTRICT OF WASHINGTON**

8  
9 Plaintiff(s)  
10 Michael W. Broussard  
vs.  
11 President of the United States  
12 Obama, Barack - ET AL

13 Defendant(s),  
14

15 WRITTEN CONSENT FOR  
16 PAYMENT OF COSTS FROM ANY  
17 RECOVERY UNDER LOCAL RULE  
18 CR3(b)

19 I, Michael Wade Broussard  
20 hereby consent that any recovery in damages that I may receive in the above-captioned cause  
21 may be reduced, if so directed by the court, in such an amount as is necessary for payment of  
22 the unpaid fees and costs which are taxed against me in the course of this litigation.

23 Dated: 08-19-2020

24  
25 Michael Broussard  
Signature of Plaintiff

WRITTEN CONSENT FOR PAYMENT OF COSTS FROM ANY RECOVERY UNDER  
LOCAL RULE CR3(b)